

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

AS FILED AFTER
1st AMENDMENT AFTER
2nd AMENDMENT

IND. DEP. IND. DEP. IND. DEP.

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TOTAL IND.	7				
TOTAL DEP.	21	↓	↓	↓	↓
TOTAL CLAIMS	25	SEARCHED	EXAMINED	SEARCHED	FILED

IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.					
TOTAL DEP.		↓	↓	↓	↓
TOTAL CLAIMS	80	SEARCHED	EXAMINED	SEARCHED	FILED

BEST AVAILABLE COPY